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PTO/SB/22 (07-19)

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		<b>Docket Number (Optional)</b> 249692001700	
<b>Application Number</b> 10/588,419		<b>Filed</b> February 8, 2005 (Int'l)	
<b>For</b> PHOTODYNAMIC THERAPY FOR THE TREATMENT OF HYPERACTIVE SEBACEOUS GLAND DISORDERS USING TOPICALLY APPLIED HYDROPHOBIC GREEN PORPHYRINS			
<b>Art Unit</b> 1619		<b>Examiner</b> D. A. Jagoe	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ 1,110.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95).

☒ attorney or agent of record. Registration Number 54,403

☐ attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

Leslie A. Robinson  
Signature

August 19, 2010  
Date

Leslie A. Robinson  
Typed or printed name

(858) 314-7692  
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, one below.

☒ Total of 1 forms are submitted.

I hereby certify that this paper is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated August 19, 2010

Signature: Jessica A. Conen (Jessica A. Conen)

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